Self Service "My Biz (NAF)"
Module II, Chapter 3
Updating My Information

Introduction

The Self Service Employee "My Biz (NAF)" provides Non-Appropriated Fund (NAF) employees the ability to log into DCPDS and update employee data. The following pages provide a brief overview of the new functionality.

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Update My Information

The Update My Information function allows employees to update employee information.

Privacy Act Statement

Before updates can be made, employees must ACCEPT the 'Privacy Act Statement'.

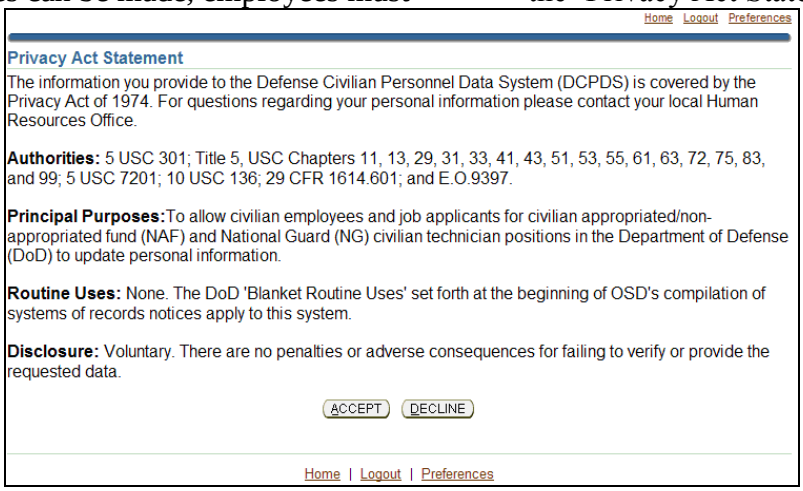

Figure 1

Information Tabs - The following is a list of the Tabs and information available under each.

General Information in the Employee region includes the employee's name and employee number. The employee number is a unique sequence number that is assigned by the system for each person in DCPDS. It is used to uniquely identify employees that may have more than one record/job in DCPDS.

Work Information tab contains employee's work email address, phone numbers and physical work address.

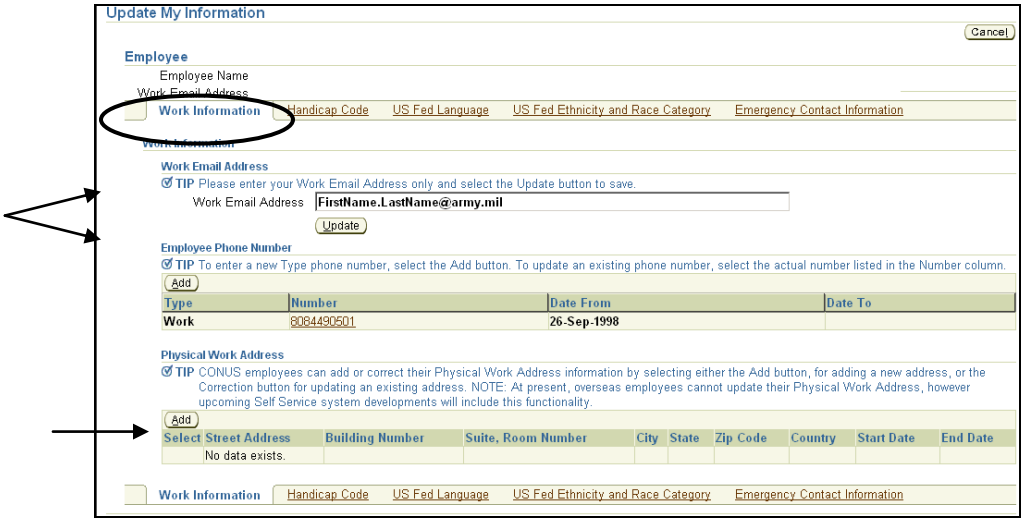

Figure 2

Work Email Address

To Add/Update work email address, type the new email address and then click the Update button. Email address is currently being used for the NSPS Performance Appraisal notification. In the future, email address will be used to communicate personnel information directly to all employees.

Figure 3

You will receive a confirmation page once the update has occurred. Click Continue Updating Your Information link to continue updating your work information. To return to the MyBiz menu click on View Your My Biz Account link.

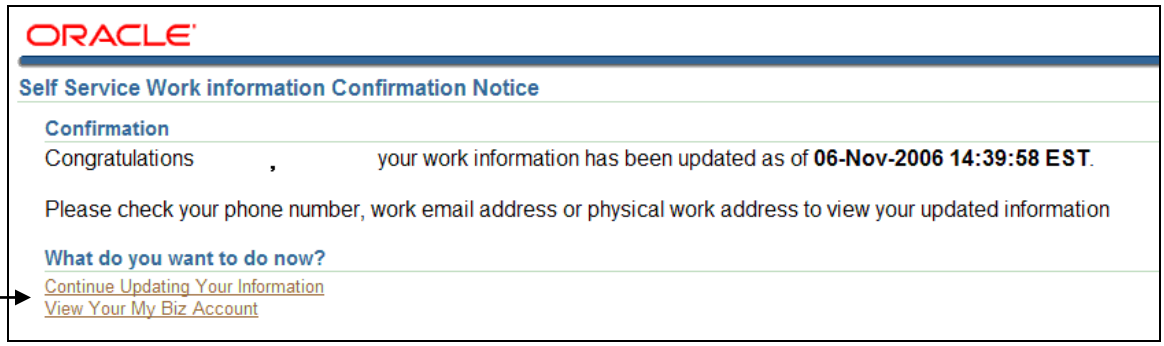

Figure 4

Phone Numbers

To add a new phone number, click the Add button.

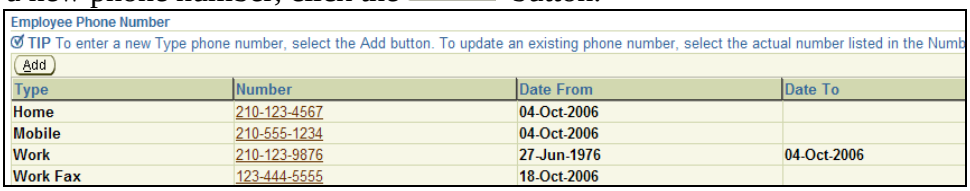

Figure 5

Select a phone type from the drop down list. Phone Type, Phone Number and Date From are required fields which are noted with an *. Once you have selected a phone type enter your phone number to include area code and dashes. Extensions may also be included. Example: 210-123-45678 Ext 123.

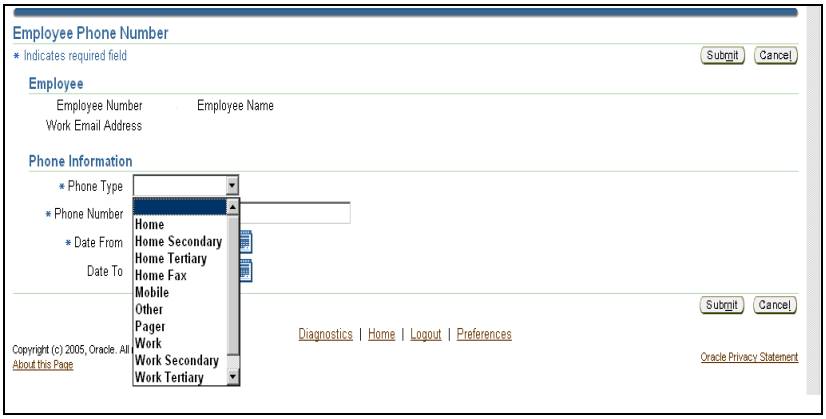

Figure 6

Click on the calendar to select the "Date From" from the calendar. The date will auto populate into the field. DCPDS is a date tracked system and requires a start date for all data fields.

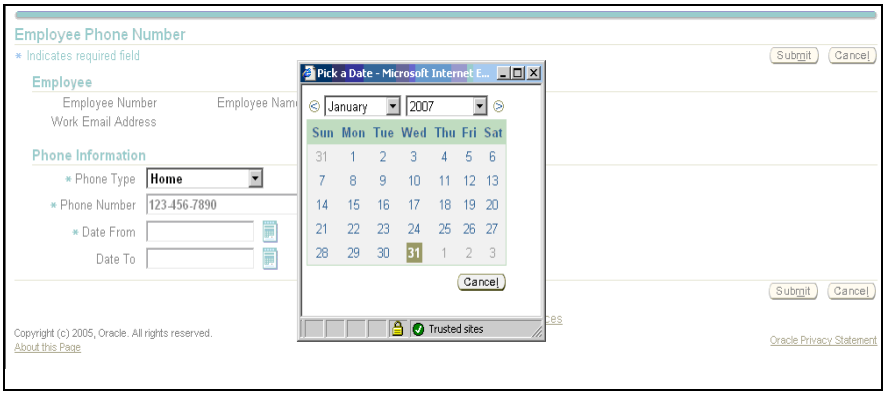

Figure 7

Employees will only enter a date in the 'Date To' data field when the current phone number is no longer valid. By entering a date in this field, the phone number will be end-dated allowing employees to add a new phone number.

To save the new phone number, click the Submit button.

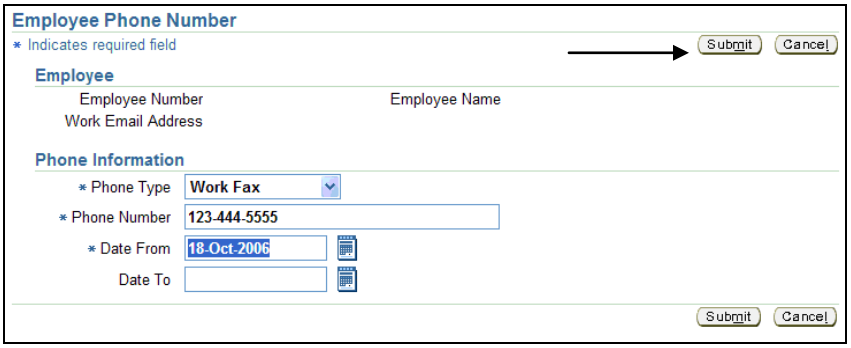

Figure 8

The new phone number has now been added to the employee's My Biz record.

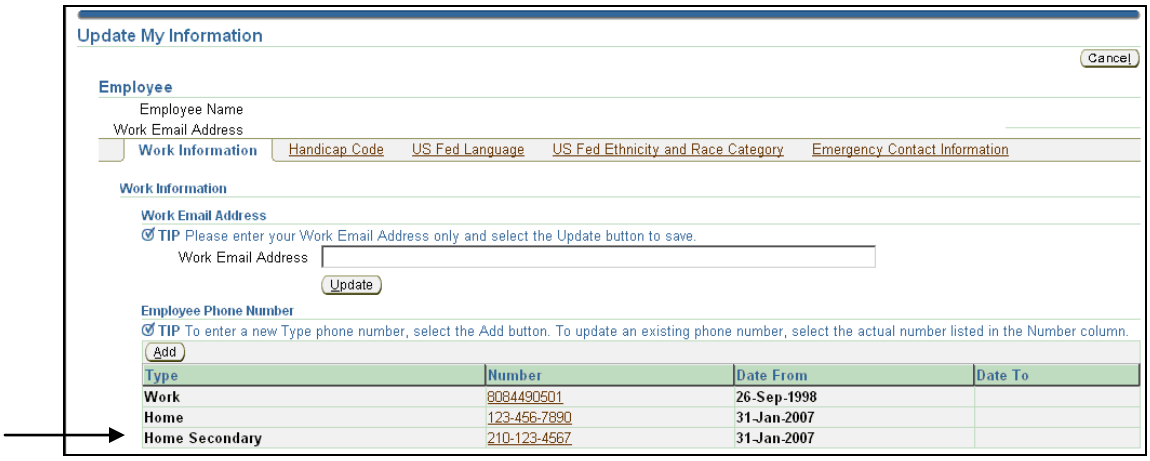

Figure 9

Edit a Phone Number

To edit an existing phone number click on the phone number link 210-123-4567. Change the phone number and click the Submit button. A future Self Service modification will only display those phone numbers that have not been end-dated.

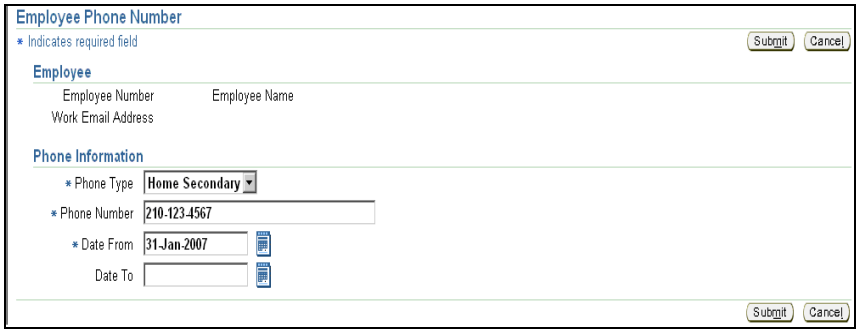

Figure 10

Physical Work Address

To add Physical Work Address click the Add button. Self Service only allows employees to 'add' one Physical Work address update within a 24 hour period.

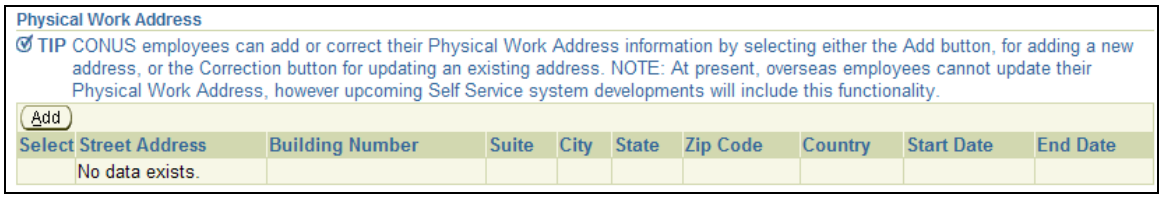

Figure 11

When adding a Physical Work Address, Street Address, City, State, Zip Code are required fields and are noted with an *.

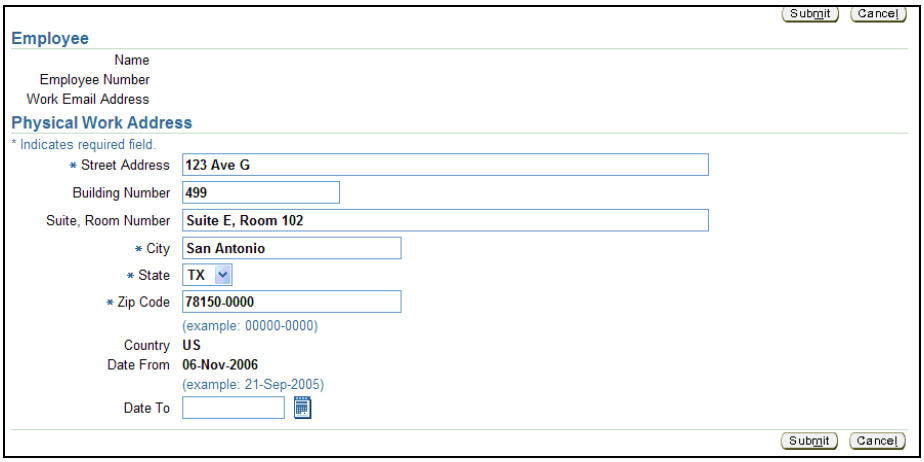

Figure 12

Select the Submit button to save data.

Once you have save your physical work address a confirmation page will appear allowing the employee to print their change.

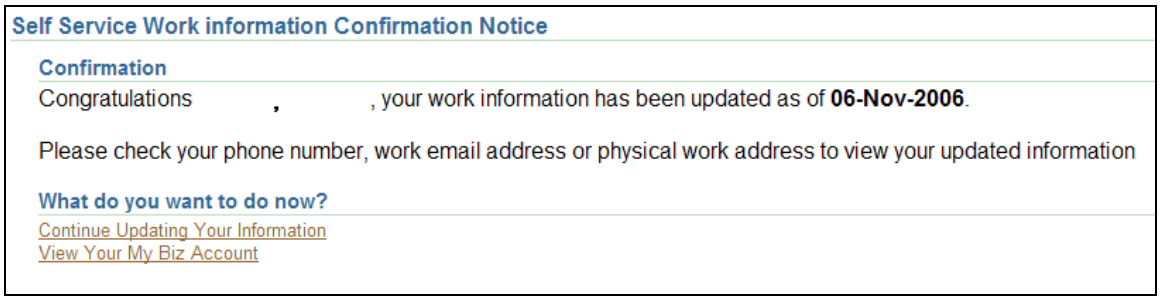

Figure 13

To return to the language tab, click on the Continue Updating Your Information link. To return to the My Biz menu, click on the View Your My Biz Account link.

Edit Physical Work Address

To edit or correct physical work address click the radio button next to the physical work address, then click on the Correction button.

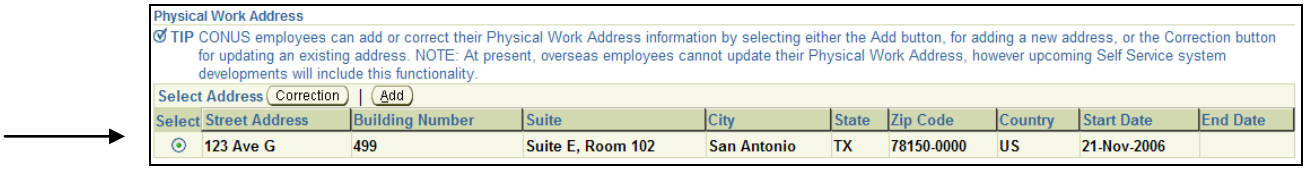

Figure 14

Make the necessary changes to your physical work address, and then click the Submit button.

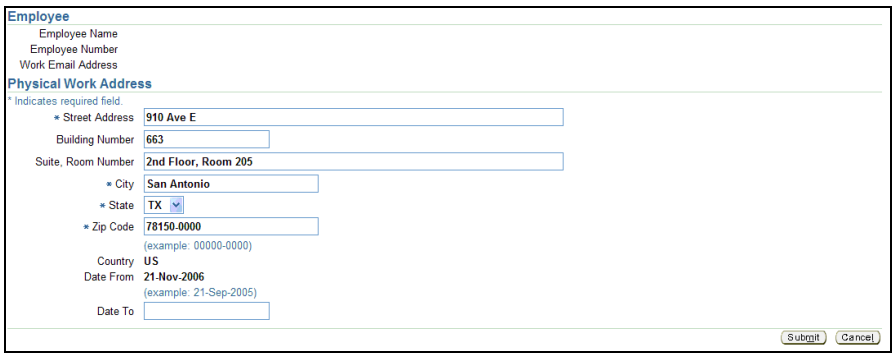

Figure 15

Your changes have now been updated to you're My Biz record.

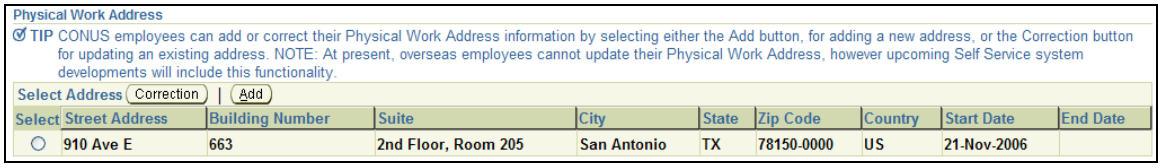

Figure 16

Handicap Code Tab contains employee's current handicap code.

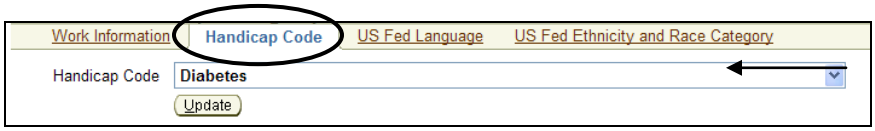

Figure 17

To update handicap code select from the drop down list using the down arrow. Once you have selected the appropriate code, click the Update button.

US Fed Language Tab contains employee's languages.

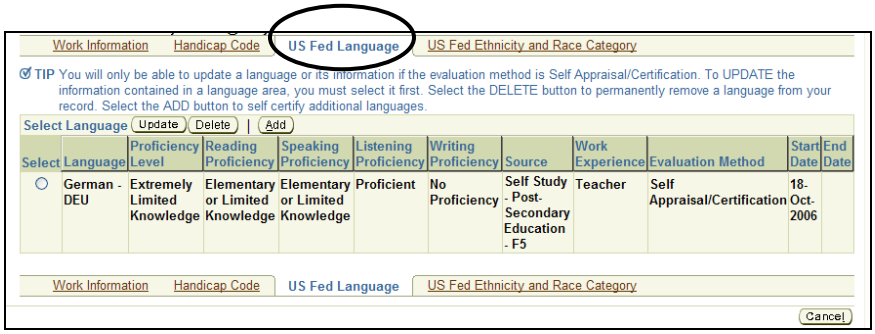

Figure 18

Employees can update proficiencies in an exiting language, delete a language or add a new language to their My Biz record.

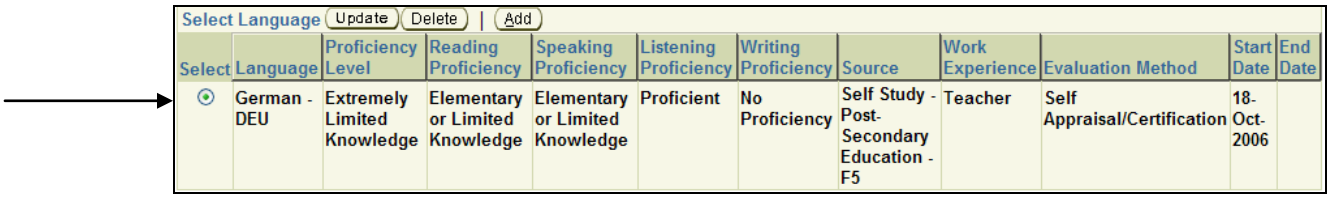

Figure 19

To update an existing language you must click the radio button next to the language, then click the Update button.

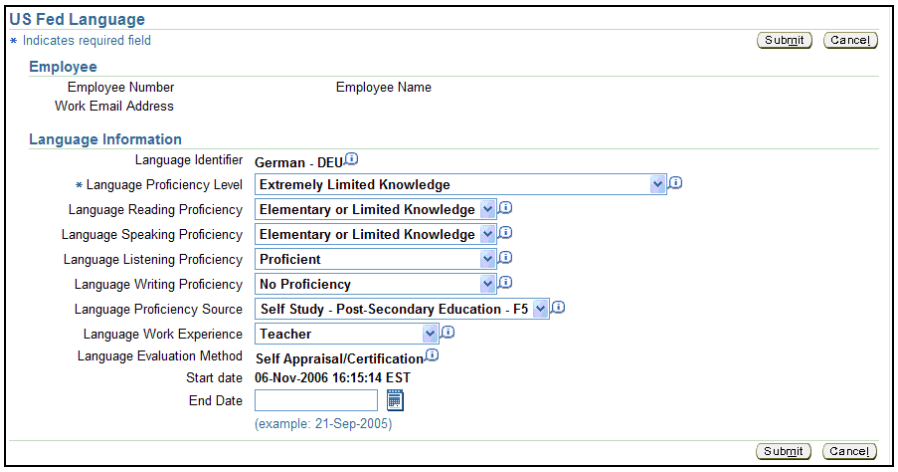

Figure 20

Once all changes have been made, click the Submit button to save your changes.
To delete an existing language you must click the radio button next to the language, and then click the Delete button.

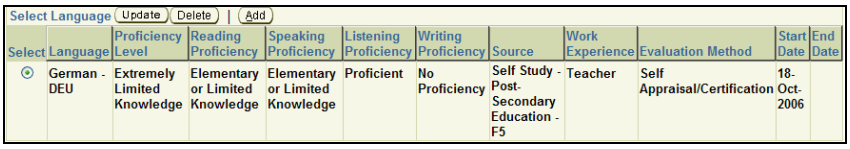

Figure 21

Once you click on the delete button a notification will appear, click on "Yes" to delete, "No" to return to the language screen.

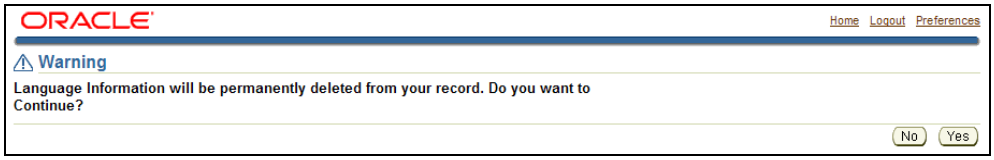

Figure 22

To add a new language to must click the Add button.

Use the drop down menus to select the appropriate data for each item.

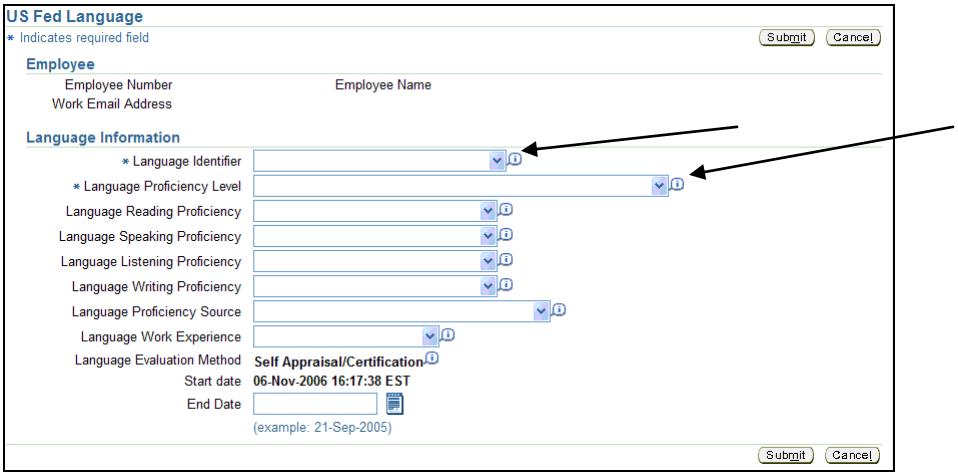

Figure 23

Once you have completed entering your new language, click the Submit button to save your language.

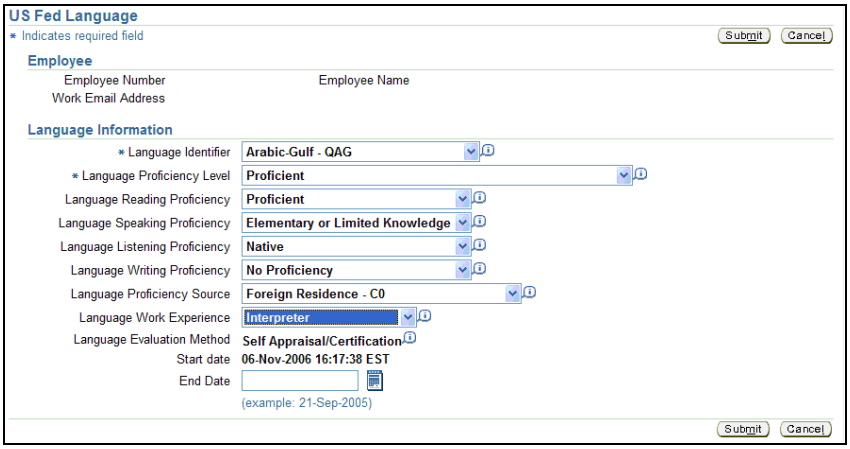

Figure 24

Once you have save your language data a confirmation page will appear allowing the employee to print their change.

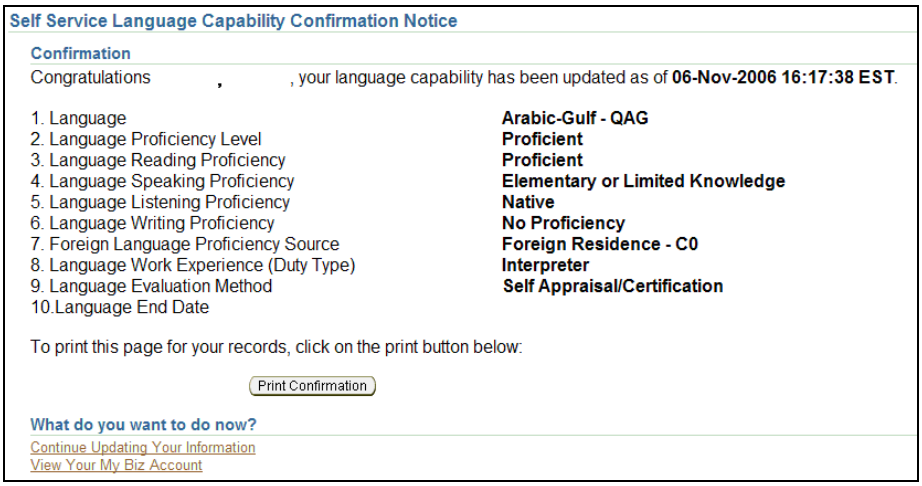

Figure 25

To return to the language tab click on the Continue Updating Your Information link. To return to the My Biz menu click on the View Your My Biz Account link.

US Fed Ethnicity and Race Category Tab contains employee's ethnicity and race.

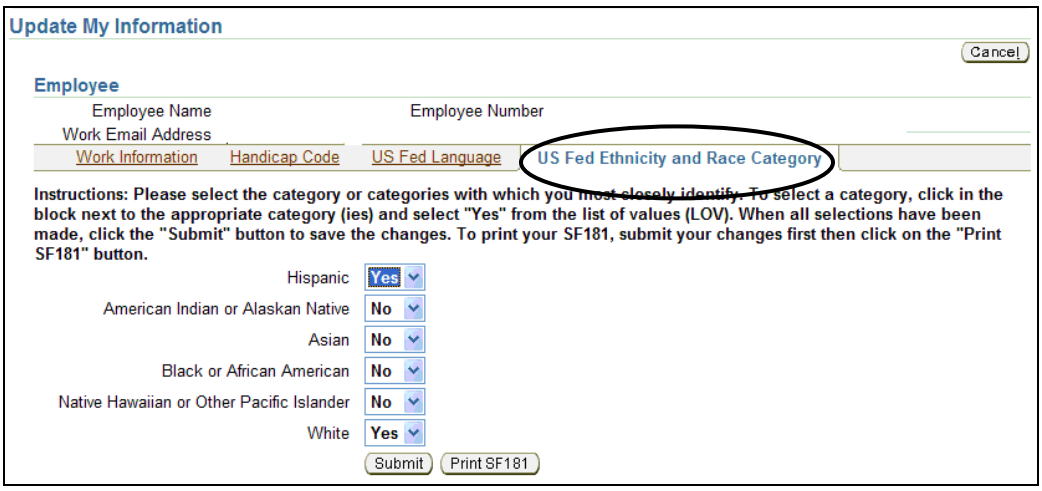

Figure 26

To update ethnicity and race use the drop down menu, select either "Yes" or "No". Once you are ready to update, click the Submit button. To print the SF181 form, select the Print SF181 button.

The SF181 can either be saved to your PC or can be opened and printed. To open the SF181 click the Open button.

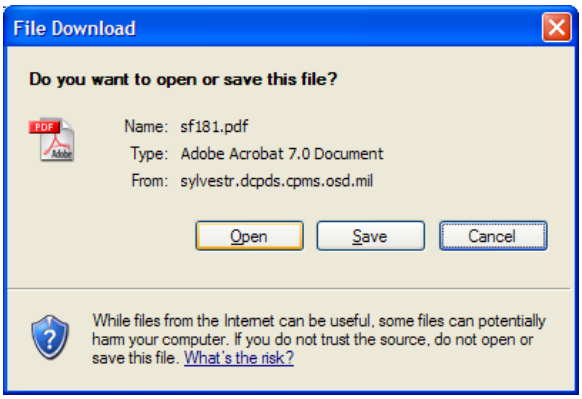

Figure 27

SF181

To print the SF181 click on the printer icon or select file, print.

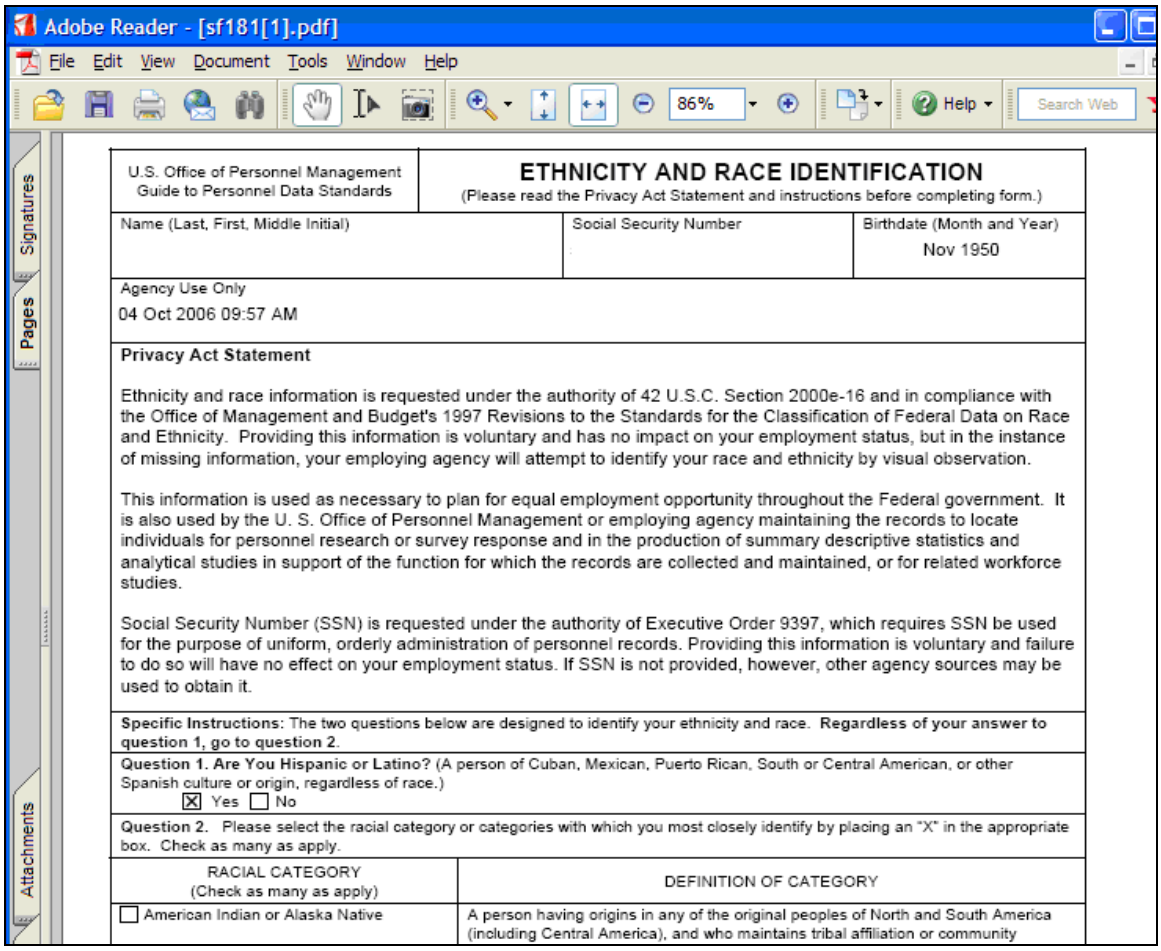

Figure 28

Emergency Contact Information Tab contains employee's emergency contact information.

Click the link Emergency Contact Information to add, change or remove your emergency contact information.

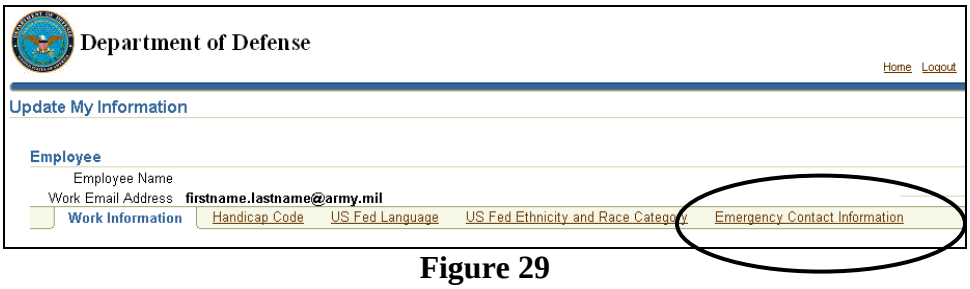

Figure 29

Adding Emergency Contact Information

To add emergency contact information, click the Add button.

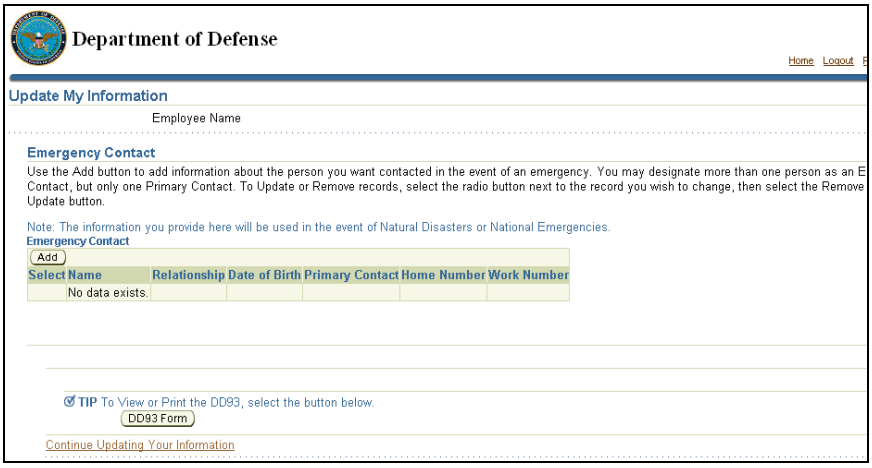

Figure 30

Enter your emergency contact's first name, middle name and last name into the appropriate name fields. The blue asterisk indicates that the field is required. The relationship field has a drop down list that you must select from. If you select (Adopted Child, Child, Foster Child, Recognized Natural Child or Step Child) you must enter their data of birth in the Additional Emergency Contact Information area at the bottom of the screen.

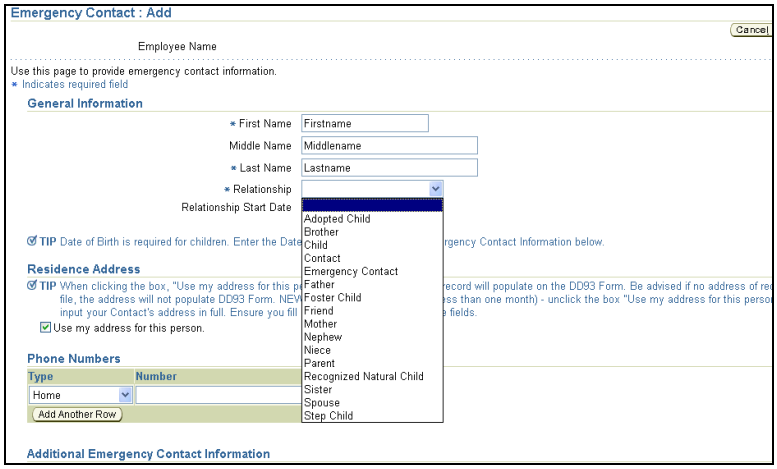

Figure 31

The Relationship Start Date will be automatically set to today's date.

The Primary Contact field should only be check if you would like to designate that person as your primary contact. Note you can only designate one person as your primary contact.

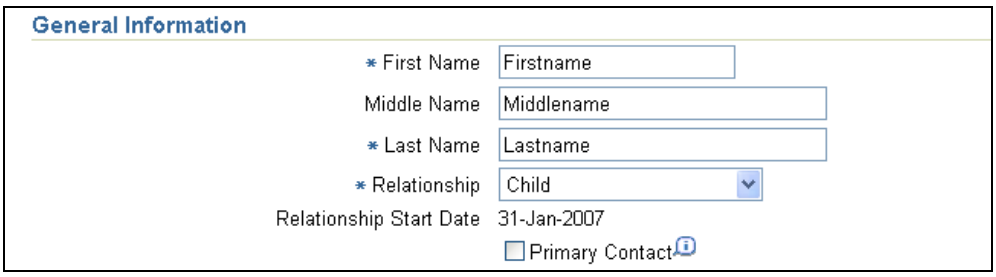

Figure 32

By checking the Use my address for this person. you have the option of using your home address information as the address for your emergency contact, example your spouse, child, etc.

Figure 33

Multiple phone numbers can be entered for each emergency contact. To select a phone types click the drop down arrow.

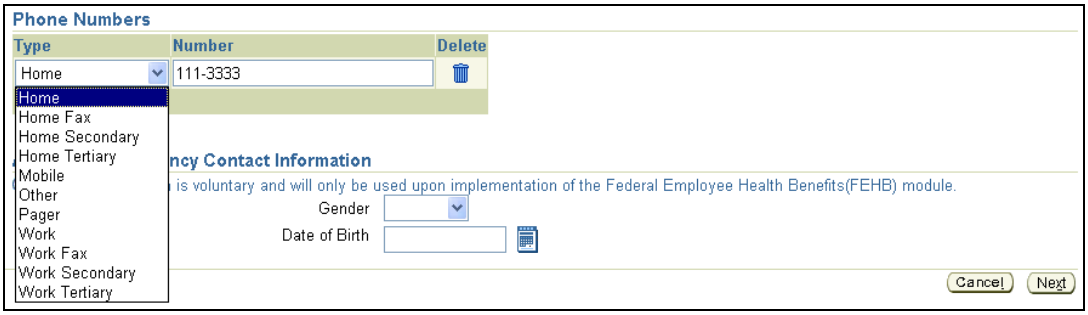

Figure 34

To add additional phone numbers click the Add Another Row button. Note: Home phone type can only be selected once, if you have additional home phone numbers use the Home Secondary and Home Tertiary phone types.

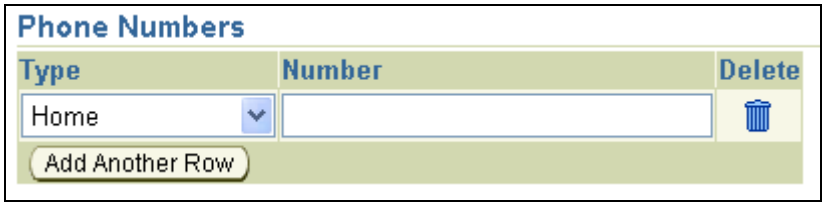

Figure 35

In the Additional Emergency Contact Information area, you may enter the optional information: Gender and Date of Birth.

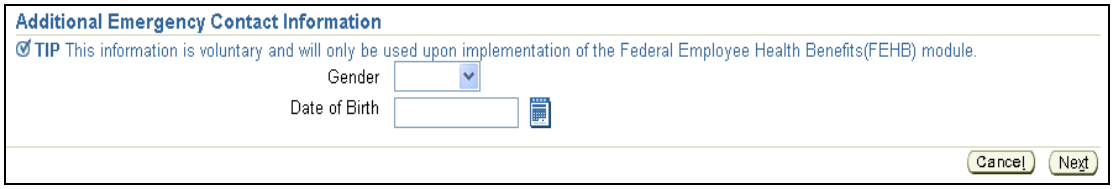

Figure 36

When you have finished entering all of your information, click the Next button to continue.

A Review page will appear so that you can ensure the information is correct before saving. Click the Submit button to save your information. Click the Back button to return to the previous screen to make any necessary corrections. To print this information, click the Printable Page button. To exit without saving your information, click the Cancel button.

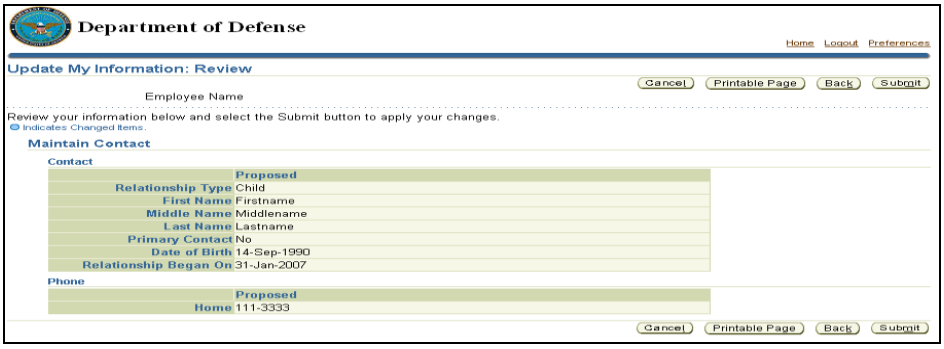

Figure 37

A confirmation page will be displayed when your information has been saved. To return to the Emergency Contact page click the Return to Overview button.

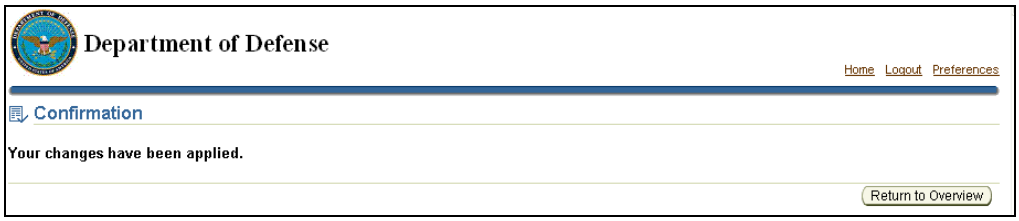

Figure 38

Updating Emergency Contact Information

To update information on an existing emergency contact person, first click the radio button next to the contacts name, then click the Update button.

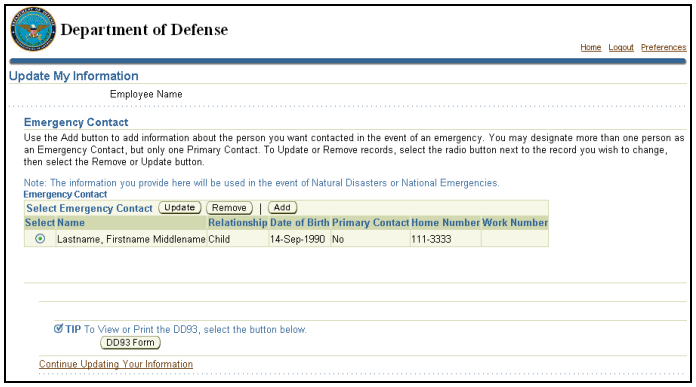

Figure 39

Make the necessary updates and click the Next button.

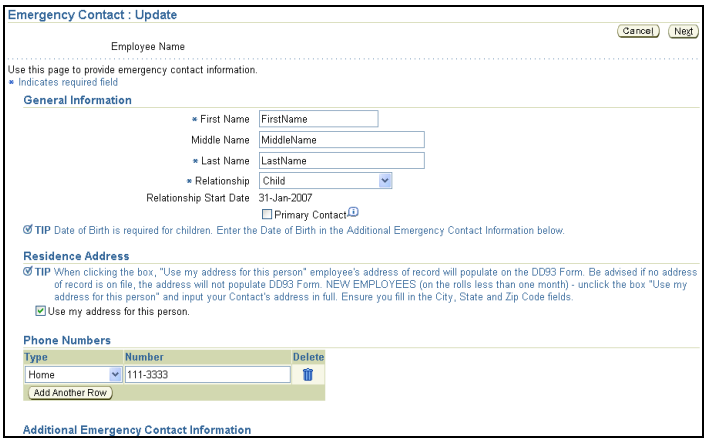

Figure 40

A Review page will appear so that you can ensure the information is correct before saving. The items marked with a blue dot are the items that were changed. Click the Submit button to save your information. Click the Back button to return to the previous screen to make any necessary corrections. To print this information, click the Printable Page button. To exit without saving your information, click the Cancel button.

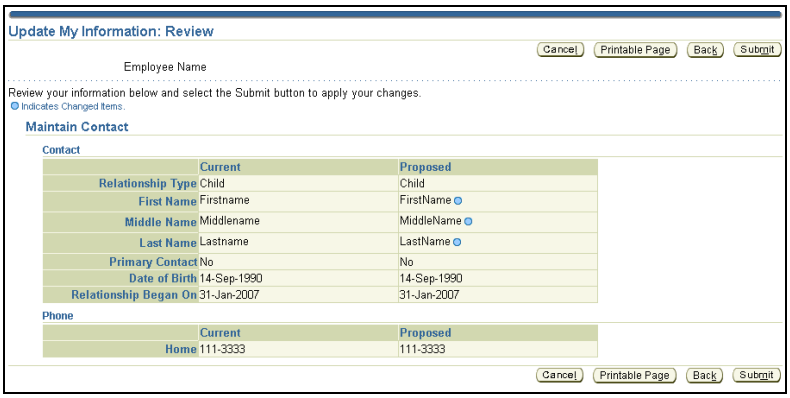

Figure 41

A confirmation page will be displayed when your information has been saved. To return to the Emergency Contact page click the Return to Overview button.

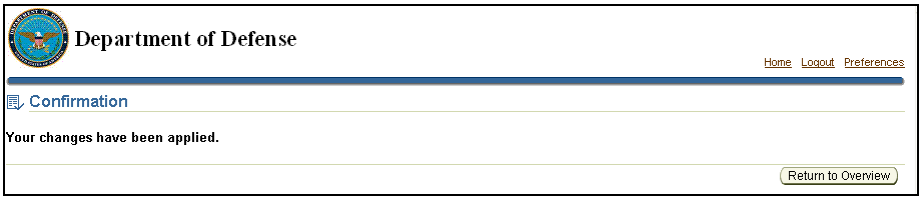

Figure 42

A warning page will be displayed if you selected Cancel. If you want to cancel and exit, select the Yes button. If you want to return to the previous page select the No button.

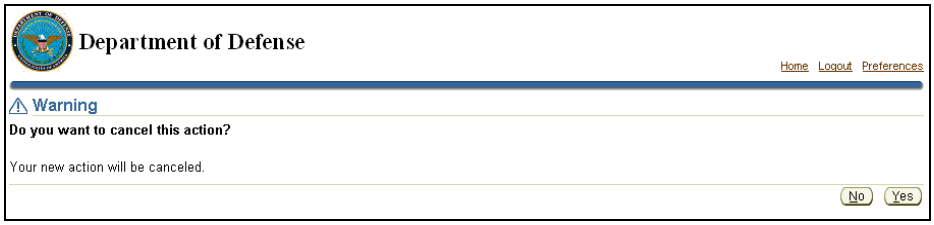

Figure 43

Removing Emergency Contact Information

To remove an emergency contact, first click the radio button next to the person you want to remove, and then click the Remove button.

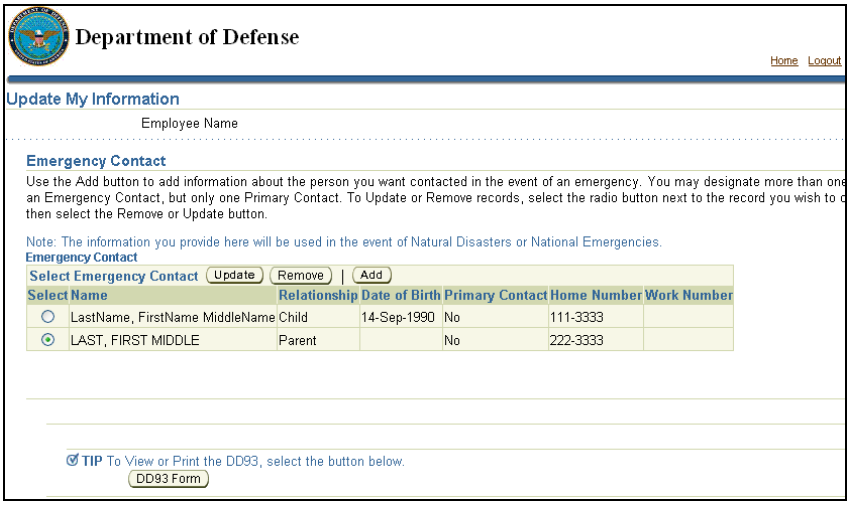

Figure 44

Once you have verified that you selected the correct person to remove, click the Next button to continue.

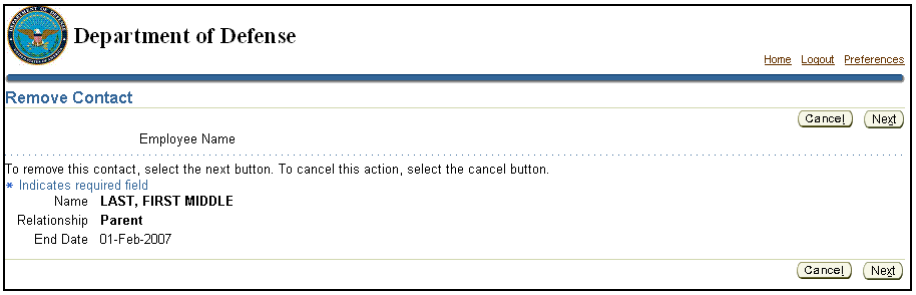

Figure 45

Click the Submit button to remove and save your change. Click the Back button to return to the previous screen to make any necessary corrections. To print this information, click the Printable Page button. To exit without removing your contact person, click the Cancel button.

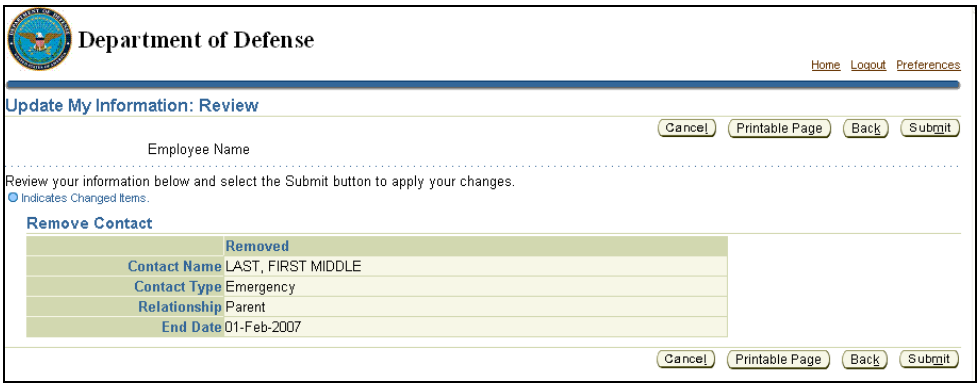

Figure 46

A confirmation page will be displayed when your information has been removed. To return to the Emergency Contact page click the Return to Overview button.

Figure 47

A warning page will be displayed if you selected Cancel. If you want to cancel and exit, select the Yes button. If you want to return to the previous page select the No button.

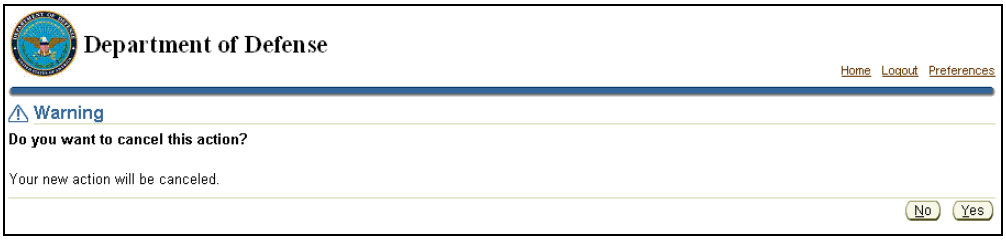

Figure 48

Printing DD93 Form

To print the DD93 Form, click the DD93 Form button.

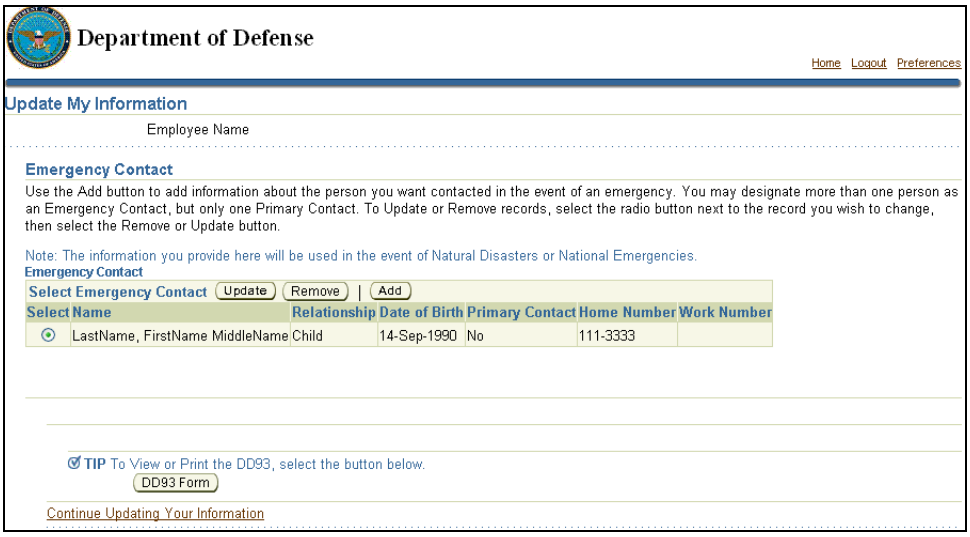

Figure 49

The DD93 can either be saved to your PC or can be opened and printed. To open the DD93 click the Open button.

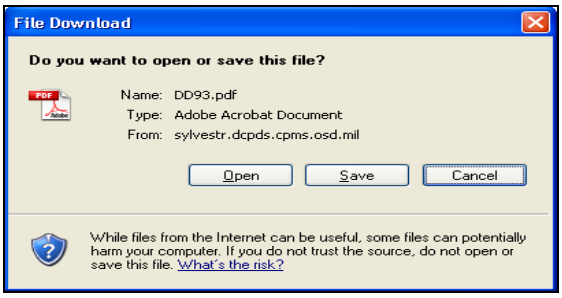

Figure 50

DD Form 93

To print the DD93 click on the printer icon or select file, print.

RECORD OF EMERGENCY DATA

PRIVACY ACT STATEMENT

AUTHORITY: 10 USC 1475 to 1480 and 2771, 38 USC 1970, 44 USC 3101, and EO 9397, November 1943 (SSN).

PRINCIPAL PURPOSES: This form is used to designate beneficiaries for certain benefits in the event of the servicemember's death. It is a guide for the disposition of that member's pay and allowances if captured, missing or interned. It also shows names and addresses of the person(s) the servicemember desires to be notified in case of emergency or death. The purpose of soliciting the SSN is to provide positive identification.

ROUTINE USES: None.

DISCLOSURE: Voluntary; however, failure to provide personal identifier information may delay notification of the servicemember's status or may handicap processing of benefits to designated beneficiaries.

INSTRUCTIONS TO SERVICEMEMBER

This extremely important form is to be used by you to show the names and addresses of your spouse, children, parents, and any other person(s) you would like notified if you become a casualty, and, to designate beneficiaries for certain benefits if you die. IT IS YOUR RESPONSIBILITY to keep your Record of Emergency Data up to date to show your desires as to bene- ficiaries to receive certain death payments, and to show changes in your family or other dependents listed; for example, as a result of marriage, civil court action, death, or address change. Regarding your designation in Item 11, "Allotment if Missing" (if used by your Service), please read the following statement carefully, and sign on the line provided:

I fully understand that, if I am captured, missing, or interned, my designation of allotments to dependents from my pay and allowances serves only as a guide to the Secretary of my Service. The Secretary may alter my designated allotment in the best interests of myself, my dependents, or the United States Government.

(Signature of Servicemember)

1. NAME *(Last, First, Middle)*	2a. SSN	b. INITIAL *(To indicate valid SSN)*	3a. SERVICE	b. REPORTING UNIT CODE
Employee's name	social security		Civ	DUTY STATION NAVY

4a. SPOUSE NAME	b. ADDRESS *(Include ZIP Code)*

5. CHILDREN a. NAME	b. RELATIONSHIP	c. DATE OF BIRTH *(YYYYMMDD)*	d. ADDRESS *(Include ZIP Code)*
FirstName M. LastName	Child	19900914	5088 Jeff Ryan Dr, Herndon VA 20170-3626

6a. FATHER NAME	b. ADDRESS *(Include ZIP Code)*

7a. MOTHER NAME	b. ADDRESS *(Include ZIP Code)*

8a. DO NOT NOTIFY DUE TO ILL HEALTH	b. NOTIFY INSTEAD

9a. BENEFICIARY(IES) FOR DEATH GRATUITY *(If no surviving spouse or child)*	b. ADDRESS *(Include ZIP Code)*	c. PERCENTAGE

10a. BENEFICIARY(IES) FOR UNPAID PAY/ ALLOWANCES	b. ADDRESS *(Include ZIP Code)*	c. PERCENTAGE

11. ALLOTMENT DESIGNEE/PERCENTAGE IF MISSING *(Subject to Secretarial determination)*

12. INSURANCE *(SGLI and other Insurance Companies/Policy Numbers)*	a. SGLI *(Optional Service Use)* ☐ MAXIMUM ☐ NO ☐ OTHER *(Amount)* _____	b. INSURANCE COMPANIES/POLICY NUMBERS

13. CONTINUATION/REMARKS

14. SIGNATURE OF SERVICEMEMBER *(Include rank, rate, or grade)*	15. SIGNATURE OF WITNESS *(Include rank, rate, or grade)*	16. DATE SIGNED *(YYYYMMDD)*
Electronically Signed Doe, Jane,		20070201

DD FORM 93, AUG 1998 PREVIOUS EDITION MAY BE USED USAPPC V1.00

Figure 51